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# FORM D



# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

( check if this is an amendment and name has changed and indicate change)

OMB APPROVAL							
OMB Number:	3235-0076						
Expires:							
Estimated average burden							
houre par reenone	9 16.00						

SEC USE ONLY					
Prefix	Serial				
DATE F	RECEIVED				

Senior Convertible Notes Due 2012	milent and hame has changed, and indicate change.	All Control of the Co
	Rule 504 Rule 505 Rule 506 Section 4(6)	□ ULOE 14W 0 5 2006
	A. BASIC IDENTIFICATION DATA	185/8/
1. Enter the information requested about the iss	uer	
Name of Issuer ( check if this is an amendme	ent and name has changed, and indicate change.)	
WILLBROS GROUP, INC.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Plaza 2000 Building, 50th Street, 8th Floor, P.O.	Box 0816-01098 Panama, Republic of Panama	+50-7-213-0947
Address of Principal Business Operations (if different from Executive Offices)  4400 Post Oak Parkway, Suite 1000, c/o Admin.	(Number and Street, City, State, Zip Code) Offices of Willbros USA, Inc., Houston, Texas 77027	Telephone Number (Including Area Code) (713) 403-8000
Brief Description of Business	Chicago Tambia Con American American American Control	i
Providing construction and engineering sen facilities for onshore, coastal and offshore le	vices to industry and governmental entities world ocations.	dwide, specializing in pipelines and associated
	ited partnership, already formed  other (	please specify) PROCESSIA
	Month Year anization: 12 91 Actual Esti nter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	mated IJAN 1 3 2005 e: THOMSON
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of so 77d(6).	ecurities in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
and Exchange Commission (SEC) on the earlier of	n 15 days after the first sale of securities in the offering the date it is received by the SEC at the address given bed States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Con	mmission, 450 Fifth Street, N.W., Washington, D.C. 20	0549.
Copies Required: Five (5) copies of this notice my photocopies of the manually signed copy or bear ty	ust be filed with the SEC, one of which must be manual yped or printed signatures.	ly signed. Any copies not manually signed must be
	all information requested. Amendments need only report y material changes from the information previously supp	
Filing Fee: There is no federal filing fee.		

- ATTENTION -

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

this notice and must be completed.

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Curran, Michael F. Business or Residence Address (Number and Street, City, State, Zip Code) Plaza 2000 Building, 50th Street, 8th Floor, P.O. Box 0816-01098 Panama, Republic of Panama Check Box(es) that Apply: Promoter Beneficial Owner Z Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Allcorn, John K. Business or Residence Address (Number and Street, City, State, Zip Code) Plaza 2000 Building, 50th Street, 8th Floor, P.O. Box 0816-01098 Panama, Republic of Panama Promoter Check Box(es) that Apply: Beneficial Owner Z Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Etheridge, R. Clay Business or Residence Address (Number and Street, City, State, Zip Code) Plaza 2000 Building, 50th Street, 8th Floor, P.O. Box 0816-01098 Panama, Republic of Panama Executive Officer Check Box(es) that Apply: Beneficial Owner Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Dalton, John "Jay" T. Business or Residence Address (Number and Street, City, State, Zip Code) Plaza 2000 Building, 50th Street, 8th Floor, P.O. Box 0816-01098 Panama, Republic of Panama Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Williams, Warren L. Business or Residence Address (Number and Street, City, State, Zip Code) Plaza 2000 Building, 50th Street, 8th Floor, P.O. Box 0816-01098 Panama, Republic of Panama ☐ Beneficial Owner Check Box(es) that Apply: Promoter Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Bump, Larry J. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Willbros USA, Inc., 4400 Post Oak Parkway, Suite 1000, Houston, TX 77027 Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Isaacs, S. Fred Business or Residence Address (Number and Street, City, State, Zip Code) c/o Willbros USA, Inc., 4400 Post Oak Parkway, Suite 1000, Houston, TX 77027

### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Leidel, Peter A. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Yorktown Partners LLC, 410 Park Avenue, 19th Floor, New York, NY 10022 Check Box(es) that Apply: Executive Officer Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Mitchell, Rodney B. Business or Residence Address (Number and Street, City, State, Zip Code) The Mitchell Group, 1100 Louisiana, Suite 4810, Houston, TX 77002 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Taylor, Jr., James B. Business or Residence Address (Number and Street, City, State, Zip Code) 15 Sunflower Drive, Santa Fe, NM 87501 Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Williams, S. Miller Business or Residence Address (Number and Street, City, State, Zip Code) c/o Willbros USA, Inc., 4400 Post Oak Parkway, Suite 1000, Houston, TX 77027 Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Wells Fargo & Company/Wells Capital Management Incorporated Business or Residence Address (Number and Street, City, State, Zip Code) 420 Montgomery Street, San Francisco, California 94104/525 Market Street, 10th Floor, San Francisco, California 94105 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

B. INFORMATION ABOUT OFFERING														
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.							Yes	No <b>X</b>					
2.									\$_N/A					
3. 4	φ1							Yes	No 🗷					
7.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
	,	Last name n Securitie	first, if indi	vidual)										
			Address (N	umber and	d Street, Ci	ty, State, Z	Lip Code)							
277	7 Park Av	renue, 3rd	Floor, New	York, NY	10172									
Nai	me of As	sociated Br	oker or Dea	aler										
Sta	tes in Wł	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers							
	(Check	"All States	" or check	individual	States)							All States		
	AL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	C/A KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR	
Ful	l Name (	Last name	first, if indi	vidual)			<del></del>							
Bus	siness or	Residence	Address (N	Jumber an	d Street, C	ity, State, 2	Zip Code)							
Nai	me of As:	sociated Br	oker or Dea	aler										
Sta			Listed Has											
	(Check	"All States	s" or check	individual	States)	•••••		•••••	······	••••••		☐ All	l States	
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	MN OK WI	MS OR WY	ID MO PA PR	
Ful	ll Name (	Last name	first, if indi	vidual)	· · · · ·									
Business or Residence Address (Number and Street, City, State, Zip Code)														
Name of Associated Broker or Dealer														
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers														
(Check "All States" or check individual States)								l States						
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR	

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	0.00	\$ 0.00
	Equity		\$ 0.00
	Common Preferred		
	Convertible Securities (including warrants)	84,500,000.00	s 65,000,000.00
	Partnership Interests		\$ 0.00
	Other (Specify)		§ 0.00
	Total		-
	Answer also in Appendix, Column 3, if filing under ULOE.	,	<u> </u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	North	Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	8	\$ 65,000,000.00
	Non-accredited Investors		\$_0.00
	Total (for filings under Rule 504 only)	N/A	\$_N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$_N/A
	Regulation A	N/A	\$_N/A
	Rule 504	N/A	\$_N/A
	Total	N/A	\$_N/A
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0.00
	Printing and Engraving Costs		\$_0.00
	Legal Fees		\$_100,000.00
	Accounting Fees		\$_0.00
	Engineering Fees		\$ <u>0.00</u>
	Sales Commissions (specify finders' fees separately)		\$_2,710,000.00
	Other Expenses (identify) Trustee Fees (Administration Fee and Acceptance Fee)		\$ 23,000.00
	Total	<b>\</b>	\$ 2,833,000.00

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS				
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		81,667,000.00 \$			
5.	each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of	nount of the adjusted gross proceed to the issuer used or proposed to be used for shown. If the amount for any purpose is not known, furnish an estimate and of the estimate. The total of the payments listed must equal the adjusted gross r set forth in response to Part C — Question 4.b above.					
			Payments to Officers, Directors, & Affiliates	Payments to Others			
	Salaries and fees		\$_0.00				
	Purchase of real estate		\$_0.00	\$_0.00			
	Purchase, rental or leasing and installation of macand equipment	chinery [	\$0.00	<u> </u>			
	Construction or leasing of plant buildings and fac	ilities	\$ <u>0.00</u>	\$_0.00			
	Acquisition of other businesses (including the val offering that may be used in exchange for the assessuer pursuant to a merger)	ets or securities of another		\$0.00			
	Repayment of indebtedness			\$_15,110,342.00			
	Working capital		\$_0.00	\$_66,556,658.00			
	Other (specify):	[	\$_0.00	\$_0.00			
				s_0.00			
	Column Totals			\$81,667,000.00			
	Total Payments Listed (column totals added)	Total Payments Listed (column totals added)		81,667,000.00			
		D. FEDERAL SIGNATURE					
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Commiss	sion, upon writte				
Iss	uer (Print or Type)	Signature	Date				
W	ILLBROS GROUP, INC.	Warre Joll	1/4/	/ v			
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)					
Wa	Warren L. Williams Senior Vice President, Chief Financial Officer and Treasurer						

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)